

SECTION 5 INPATIENT REHABILITATION SCHEDULE

Effective for dates of service October 16, 2003 and after, inpatient rehabilitation providers subject to DMS established length of stay should **not** use the special diagnosis codes created by DMS to report the rehabilitation diagnosis. The following table reflects the ICD-9-CM diagnosis codes that are to be used to report the rehabilitation diagnosis for dates of service October 16, 2003 and after. For dates of service prior to October 16, 2003, providers should use the appropriate Missouri Medicaid specific diagnosis codes.

DESCRIPTION	DMS Established Length of Stay	Special Diagnosis Code for Svc. Dates prior to 10/16/03	ICD-9-CM DIAGNOSIS CODE(S) for Svc. Dates 10/16/03 and after
Spinal cord injury, quadriplegia	30 days	SC1	950 - 957
Spinal cord injury, cervical fracture	25 days	SC2	806
Spinal cord injury, paraplegia	30 days	SC3	344
Spinal cord injury, hemiplegia	25 days	SC4	342
Cerebral vascular accident	29 days	CVA	436
Head trauma	35 days	HTI	803, 854
Muscular dystrophy	20 days	MUD	359
Orthopedic trauma, arm	29 days	OT1	885 - 887
Orthopedic trauma, leg	29 days	OT2	895 - 897
Late effect of injury to the nervous system	30 days	ENS	905 - 909
Degenerative joint disease	20 days	DJD	714 - 716